**CREDIT APPLICATION**

**BUSINESS CONTACT INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Trade Name: |  | Business Type: |  | * Corporation * LLC * Partnership * Proprietorship |
| Phone No,: |  | Dun & Brad No,: |  | In ess:  I |
| Fax No.: |  | E-mail: |  | |
| Registered Company  Street Address: |  | Billing Company  Street Address: |  | |
| Registered Company  City, Slate ZIP Code: |  | Billing Company  City, Slate ZIP Code: |  | |
| **FOR PROPRIETORSHIP, PARTNERSHIP OR LLC ONLY** | | | | |
| Name: |  | Title: |  | |
| Address: |  | Phone: |  | |
| City, State, Zip: |  | E-Mail: |  | |
| Social Security No,: |  | | | |
| **FOR CORPORATION ONLY** | | | | |
| Federal Tax ID: | Date of Incorporation:  I | | | |
| State of: |  | | | |
| **BUSINESS/TRADE REFERENCES** 1 | | | | |
| Firm Name: |  | Person of Contact: |  | |
| Address: |  | City, Slate ZIP Code: |  | |
| Phone:  Firm Name: |  | E-Mail:  Person of Contact: |  | |
| Address: |  | City, Slate ZIP Code: |  | |
| Phone:  Firm Name: |  | E-Mail:  Person of Contact: |  | |
| Address: |  | City, State ZIP Code: |  | |
| Phone: |  | E-Mail: |  | |
| **BANK INFORMATION** | | | | |
| Bank Name: |  | Type of account: | □Savings □ Checking □ Other | |
| Address: |  | City, Slate ZIP Code: |  | |
| Person of Contact: |  | Title: |  | |
| Phone: |  | E-Mail: |  | |
| **SIGNATURES** 2 | | | | |
| Signature: |  | Signature: |  | |
| Name and Tille: |  | Name and Tille: |  | |
| Dale: |  | Dale: |  | |

Please complete the credit form and return via email: [sales@pentafineingredients.com](mailto:sales@pentafineingredients.com)